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Command Policy

AIR UNIVERSITY SELF-INSPECTION PROGRAM

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction implements AFPD 90-2, *Inspector General - The Inspection System*, and AFI 90-201, AETC Sup 1, *Inspector General Activities*. It establishes policies, procedures, and responsibilities governing implementation and conduct of the Air University (AU) Self-Inspection Program (SIP). Ensure all records created as a result of processes prescribed in this publication are maintained in accordance with AFMAN 37-123, *Management of Records*, and are disposed of in accordance with the Air Force AFRIMS Records Disposition Schedule (RDS), located at <https://webrims.amc.af.mil/RDS/index.cfm>. It applies to all colleges, schools, and directorates under Air University. CAP-USAF/IG, AFOATS/IG, 42 ABW/IG, and AFIT/CV, will establish and maintain SIPs for their respective organizations.

1. General. The SIP measures and evaluates quality and compliance. It provides feedback to commanders, senior supervisors and unit personnel by validating the effectiveness and efficiency of each group and agency to support the Air University mission. Your unit program should focus on: (1) how effectively, efficiently and safely you accomplish assigned missions; (2) how you identify obstacles which impact mission accomplishment; (3) how you comply with laws, instructions, regulations, technical orders, applicable audit findings, special interest items, etc.; (4) how you identify problems, provide feedback and direct problems to the proper level for action or attention; and (5) how you detect and prevent fraud, waste, and abuse.

Section A – Responsibilities

1.1. Air University Inspector General:

1.1.1. Establishes an Air University Instruction to govern the SIP.

1.1.2. Reviews and distributes Special Interest Items (SII) information and cross-feed materials.

1.1.3. Conducts program reviews and periodic spot checks as requested by Commanders, Commandants, and Directors.

1.1.4. Provides feedback to senior AU officials on unit compliance program status.

2. Unit/Directorate Self-Inspection Program Managers will:

2.1. Serve as the self-inspection focal point for their organization/unit.

2.2. Monitor the program's effectiveness and continually work to improve it.

2.3. Maintain a self-inspection binder as outlined in Paragraph 8 and Attachment 2.

2.4. Conduct semiannual self-inspections (usually between Oct-Jan and Apr-Jul).

2.5. Units may accomplish the inspection in portions throughout the six-month report period.

2.5.1. Prepare and forward a self-inspection report summary to their respective commander, director, or region after completion. See sample format at Attachment.

2.5.2. Document significant discrepancies (a defective operation that impedes or negatively impacts successful mission accomplishment) found during a self-inspection. Briefly describe the discrepancy, the proposed corrective actions, and the current status.

2.5.3. Periodically review the status of the unit/organization self-inspection program with the applicable unit commander or director. Review open discrepancies and timelines to close them out.

2.5.4. Develop and prepare corrective actions for discrepancies identified during HHQ inspections and SAVs, as well as those that are self-identified during program reviews. Document all non-compliance with proposed corrective actions.

Section B – Procedures

3. Self-Inspection Program Manager Training.

3.1. All SIPMs should be trained within 30 days of assuming their duties. New SIPMs will contact AU/IG to obtain training.

3.2. Upon completion of training, AU/IG will provide each SIPM documentation of completion for filing in their respective SIP binders.

4. Checklist Management.

4.1. There are several different types of checklists suitable for use in a self inspection program. A good number of these are Functional checklists maintained by the AETC functional managers on the AETC Inspector General's web page (<https://www.aetcf.af.mil/ig/>) or can be obtained by contacting AU/IG. Checklists such as Program Management, Unit Safety, and many others, assist SIPMs in assessing their

programs and these are the same ones used by AETC/IG inspectors. Additionally, there are programs such as Fitness and Weight Management that would be good candidates for a locally designed and generated checklist. Special Interest Items (SII) come with a checklist and these too can be a good source for special interest compliance type items. Add applicable cross-feed documented areas to your self-inspection checklists to ensure that problems identified at sister units don't exist in your unit/organization; or if they do, are eliminated and monitored.

4.1.1 AETC/IG provides functional checklists for a variety of programs found at most AETC units.

4.1.2. Each college, school, and directorate should develop and maintain individual Self-Inspection that identify compliance based requirements unique to your organization.

4.1.3. Attachment 3 contains a listing of some of the functional checklists and designates appropriate OPRs within HQ AU for each checklist or checklist sub area. NOTE: This is not an all inclusive listing.

4.2. Use general-purpose forms to maintain the Cross-Feed and Spot-Check Logs. Other formats are acceptable as long as they contain the minimum information listed in paragraphs 4.2.1 and 4.3.1.

4.2.1. The Cross-Feed Log is used to document significant areas from other unit inspections, i.e., ORIs, UCIs, AFIA, TIG Briefs, etc. that would add value to your individual programs. This Cross-Feed Log should be a simple Word or Excel document that contains, as a minimum, the following headings: TITLE OF CROSS-FEED ITEM, DATE, REVIEWER NAME, REVIEW DATE, and REMARKS.

4.2.2. All AETC/IG reports received/reviewed should be listed on the Cross-Feed Log.

4.2.3. SIPMs are encouraged to list other documents that have been reviewed and are useful/applicable to their programs.

4.3. Annotate the Spot-Check Log anytime someone other than the unit/organization's primary or alternate SIPM reviews the binder and whenever an internal self-inspection is conducted.

4.3.1. The Spot-Check Log should contain as a minimum the following headings: DATE, TYPE CHECK, NAME, ORGANIZATION, INITIALS, and REMARKS.

4.3.2. Annotate any notable findings in the Spot-Check Log REMARKS section.

4.4. The Cross-Feed Log and Spot-Check Log will be maintained until the next AETC/IG inspection.

4.5. At a minimum, review the aforementioned MAJCOM web page quarterly for any new or updated checklists and prior to unit/organization self-inspections, but more frequently is highly recommended as they are constantly being updated to reflect new requirements.

4.6. AU/IG oversees the review and revisions (if required) of all college, school, or directorate inspection checklists on an annual basis or as deemed necessary when major revisions to governing instructions occur.

4.6.1. College, schools, or directorate functional OPRs will provide inputs for checklist changes to AU/IG when requested, who will in turn maintain a copy.

5. Conducting Self-Inspections.

5.1. Self-Inspections are conducted semiannually (every six months, usually between Oct and January and April and July) or when directed by command through AU/IG and are tracked on the unit's Spot-check Log (Section I, Tab G of SIP binder). They are designed to ensure each unit/directorate is fully complying with directives and to find and correct problems that can impact mission effectiveness, as well as to help prepare for higher headquarters' inspections.

5.2. Where practical, colleges, schools, and directorates are recommended to periodically conduct cross-functional or even cross-unit/division/directorate inspections to ensure non-bias, impartial results. AU/IG may also direct an outside agency to conduct the inspection.

5.3. Colleges, schools, and directorate POCs will summarize the results of their semi-annual inspection findings for their respective organizations and forward a single annual report to AU/IG for consolidation and review by 15 Feb of each year.

5.4. Document discrepancies/findings using the procedures outlined in Paragraph 7 and Attachment 4.

5.5. All self-inspection reports will include inspection highlights for all major discrepancies identified. Units/directorates are also required to file a copy of these reports in Section 4, Tab N of their SIP binder until at least the next semiannual self-inspection as a reference to ensure that all discrepancies were corrected or are receiving the attention necessary to ensure compliance.

5.6. Units requesting a delay in conducting a semiannual self-inspection will forward their justification to AU/IG through their commander, commandant, or director, as applicable. Requests should also state when the inspection can or will be accomplished.

5.7. Conduct all unit self-inspections using all applicable checklists identified in Attachment 3, special interest item checklists, and local checklists.

5.7.1. Ensure documentation to prove compliance with inspection items is maintained by the inspected office.

5.7.2. Also review the document trail for all actions taken to correct discrepancies identified during previous HHQ inspections, SAVs and self-inspections.

6. Special Interest Items.

6.1. Special Interest Items (SII) are areas of interest or concern raised at HQ United States Air Force and HQ AETC. The AETC IG inspects applicable special interest items during UCIs.

6.2. The commander, commandant, or director for the primary area of responsibility will identify an OPR to be appointed by the CC (this should be an expert who is well versed in the SII area and can ensure compliance for the entire organization, and is not necessarily the SIPM for the unit/directorate).

6.3. The SII OPR will be trained by the unit SIP Monitor in all areas of responsibility and as to the support roles/responsibilities.

6.4. The SII checklists are available on the same MAJCOM IG web page as the inspection checklists.

6.5. The SII OPR is responsible for ensuring that the SII area is prepared for inspection. (Unit/Directorate SIPMs can help ensure the area is ready by checking it during semiannual inspections).

7. Documenting and Tracking Discrepancies/Answerable Findings.

7.1. Discrepancies and answerable findings identified during inspections requiring more than on-the-spot correction are documented and tracked until corrective actions are completed and the item is closed.

7.2. Answerable findings identified during AETC/IG inspections are handled in accordance with procedures outlined in AFI 90-201, AETC Sup 1, Attachment 12. Answerable findings/significant discrepancies identified during SAVs, self-inspections, or program reviews are documented using the format outlined in Attachment 4.

7.3. SIPMs retain copies of replies to discrepancies/answerable findings in Section 3, Tab J/K of the unit/directorate's SIP binder.

7.4. Use a separate page for each answerable finding or significant discrepancy.

7.4.1. SIPMs will obtain Director/Division Chief/Commander, as applicable, coordination on all replies to answerable findings and discrepancies when opened and monthly thereafter until closed.

7.4.2. Units/organizations should attempt to close findings and discrepancies as soon as practical, but no later than 12 months after the last day of the inspection where they are identified.

8. Self-Inspection Program Binders.

8.1. SIP binders are used to organize and maintain necessary SIP documentation and the tools of the program. SIP binders will be maintained (as a minimum) at the detachment/unit/directorate level.

8.2. SIPMs will organize their binders as indicated in Attachment 2. Add additional sections if deemed necessary.

8.3. When checklists are maintained in a binder or a location other than the unit or organization's primary binder, properly complete a memo for record and place it in the SIP binder and to identify the location where it is maintained.

8.4. Whenever the letter of appointment is changed to indicate a new SIPM, ensure that a copy of the new letter of appointment is forwarded to AU/IG for their records. Also ensure that these new personnel complete training within 30 days after appointment.

8.5. Ensure the SIP binder is entered in their unit/organization's Records Information Management System (AFRIMS) file plan and place a disposition control label inside the front cover of all SIP binders. The disposition authority is Table 37-14, Rule 10.

JOHN F. REGNI
Lieutenant General, USAF
Commander, Air University

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFPD 90-2, *Inspector General - The Inspection System*

AFI 90-201, *Inspector General Activities*

AFI 90-201, AETC Sup 1, *Inspector General Activities*

AETC Inspector General Inspection Guidance (<https://www.aetc.af.mil/ig/>)

Abbreviations and Acronyms

AETC - Air Education and Training Command

AU- Air University

C&SRL - Compliance and Standardization Requirements List

HHQ - Higher Headquarters

OPR - Office of Primary Responsibility

SAV - Staff Assistance Visit

SII - Special Interest Item

SIP - Self-Inspection Program

SIPM - Self-Inspection Program Manager

UCI - Unit Compliance Inspection

Attachment 2**SAMPLE SELF-INSPECTION BINDER TABLE OF CONTENTS*****Table of Contents*****SECTION 1 - Source Documents:**

TAB A - Appointment Letters (Maintained for the SIP monitors and alternates)

TAB B - Letters of Training (for the SIPM and alternates in the unit/directorate)

TAB C - Cross-Feed Log

TAB D - Cross-Feed Letters/Items

TAB E - Applicable Special Interest Items

TAB F - Applicable Source Documents

TAB G - Spot Check Log

SECTION 2 - Checklists

TAB H - Unit/Organization Checklist Index (see Attachment 3)

APPENDIX 1 - Applicable AETC Functional Checklists and Organizational Checklists

TAB I - Special Interest Item Checklists (as applicable)

SECTION 3 - Discrepancies

TAB J - Open Discrepancies

TAB K - Closed Discrepancies

SECTION 4 - Miscellaneous

TAB L - Unit Self-Inspection Program checklist

TAB M - AFI90-201, AETC Sup 1 (may be cross-referenced to an electronic format)

TAB N - Inspection Results (May contain portions of last HHQ inspection report or letter(s) summarizing the results of last HHQ unit inspection, as well as results from last semiannual self-inspection)

TAB O - Subordinate Unit SIP Results (May contain inspection results and other documentation (copies of discrepancy tracking formats, reference documents, and so forth)

TAB P - Other Correspondence/Training Materials.

Attachment 3

INSPECTION CHECKLISTS AND FUNCTIONAL RESPONSIBILITIES

AETC/IG Functional Checklists:

Inspector General Complaints.....	AU/IG
Judge Advocate.....	AU/JA
Public Affairs.....	AU/PA
Historian.....	AU/HO
Program Management:	
Security	Unit Security Manager
Unit Deployment Manager	Unit Manager
Family Care Plans	Commander/First Sergeant
Unit Training Program.....	Unit Training Monitor
COMPUSEC.....	Unit COMPUSEC Manager
Voting Assistance	Voting Assistance Officer
Unit Records/FOIA/PA Program.....	Unit FARMS
Resource Management.....	Unit Resource Manager
Software License Manager	Unit Software Manager
Computer Systems Equipment Custodians.....	Unit Equipment Manager
Vehicle Control.....	Unit Vehicle Control Officer
Equipment Manager and Supply Discipline	Unit Equipment Custodians
Unit Safety	Unit Safety Monitor
Operational Risk Management (ORM).....	ALL
Facility Manager	Unit Facility Manager
Government Purchase Card (GPC).....	All Card Holders
Status of Resources and Training (SORTS)	Unit SORTS Monitor
Unit Reserve Coordinators.....	Unit Reserve Coordinator
Unit Active Duty Supervisor/Reporting Official's for Individual Mobilization Augmentees	Unit IMA Monitors
Individual Mobilization Augmentees (IMAs)	IMAs
Commander's Support Staff (CSS):	
PCIII Utilization/Support.....	Unit CSS
Leave Program Management	Unit CSS
Basic Allowance for Subsistence (BAS)	Unit CSS
Subsistence in Kind (SIK)	Unit CSS
Government Travel Charge Card (GTCC) Program.....	Unit CSS
Promotion and Non-Promotion Actions	Unit CSS
Unfavorable Information Files (UIFs)/Control Roster Actions.....	Unit CSS
Duty Status Reporting.....	Unit CSS
PERSTEMPO Reporting/Tracking/Management.....	Unit CSS

Attachment 4

SAMPLE REPORTING FORMAT

Kirtland AFB NM

19-28 Aug 01

SUBJECT: 551 SOS Flying Training

FINDING

Tab B-08.04 (Finding 27): Two syllabus deviations occurred during student training (Ref MH53JMQ Syllabus)

-- One student failed a syllabus mission and was subsequently flown on an AFI 11-202 evaluation on the same flight which was subsequently graded Unsatisfactory (Q-3)

-- One student generated a syllabus deviation by flying one sortie without completing a prerequisite sortie

Syllabus deviation #1 (Non-Concur)

On 7 Aug 01, student was scheduled for NT-6 and EV-5 on the same mission. This is routine in that maximum training potential is extracted from each sortie. Prerequisite training had been completed for both events. IAW paragraph 5.5.6 in 58 SOWI 36-2201, "..... If more than one mission is completed on a flight, proportion the time to each mission." The scheduled duration for the sortie on 7 Aug was 5.0 hours. Per the MH53JPMQ syllabus, NT-6 requires 3.0 hours and EV-5 requires 0.5 hours. Helicopter training in all commands is typically event-based, meaning more than one event per scheduled sortie, i.e. NT-6 and EV-5, can be scheduled on a single sortie if that sortie is of appropriate duration to complete both events (required 3.5 hours, scheduled 5.0 hours.)

The instructor/evaluator pilot graded the student "U" on NT-6 due primarily to NVG terminal ops work. The student made several errors, which were considered to be unsafe. The decision to grade the ride "U" was not made until the debrief. Training on NT-6 was temporarily terminated in order to proceed to the next event, which was aerial refueling evaluation (EV-5), in order to meet a specified control time. Training on NT-6 was to be resumed after the aerial refueling portion of the sortie. Unfortunately, time constraints resulting from an extended time on the air refueling track led to mission termination without resuming training on NT-6, thus leading to the "U" decision in debrief. The student then made another series of errors, resulting in the "Q-3" grade on EV-5.

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On 8 Aug, the Student Flt CC conducted an interview with the student and made the recommendation that because these 2 failures occurred on the same mission, they constituted one failure. An additional consideration was the student had not previously gone to a second level progress review, and if the busts were considered to be separate, a second level progress review would have to be skipped and FEB procedures initiated. It was the thought of the Student Flt CC that this would not meet the intent of the instruction, and the recommendation was for a second level progress review followed by 2 remedial rides which would essentially "blend" the downgraded RPLs. This recommendation was approved through the Squadron, Group, and Wing Commanders.

On 23 Aug, the student satisfactorily completed the second review ride and was removed from marginal status. He completed the Night Tac phase of training on 28 Aug with no additional problems, and is currently in the final academics phase of the course.

The 58 SOW non-concurs with this finding. All portions of this flight were accomplished IAW AETC directives and the MH-53 syllabus. It is common practice across all commands (AETC, ACC, SPACECOM, AFSOC, & PACOM) for helicopter training to be event-based training vice sortie-based training. The 551 SOS conducted this event-based training IAW the lead command (AFSOC) operational training requirements in the absence of specific AETC guidance prohibiting such training. Attempting to drive helicopter training to sortie-based training vice event-based training will significantly extend the required syllabus training days and skyrocket the cost of training. The 58 SOW believes this finding, if still deemed a finding, should be charged against HQ AETC for lack of guidance in this specific area.

Estimated Completion Date: N/A; Monitor: Capt Sean Hoyer, 551 SOS/DOD, DSN 263-5939

Syllabus Deviation #2

On 3 May, a Flight Engineer student was incomplete on DT-7 for lack of formation training. The next day, 4 May, was incomplete on DT-8 for alternate insertion/extraction procedures. DT-7 is a pre-req for DT-8. The flight engineer instructor made an error and forgot to ensure that DT-7 was first signed off prior to beginning DT-8. DT-7 was completed on 7 May, and DT-8 was completed the following day, 8 May. The sequence that occurred on 7-8 May followed appropriate guidance pertaining to prerequisite training, therefore no further action is required. This is considered a one-time event.

Action completed: 8 May 01 (one-time event); Monitor: Capt Sean Hoyer, 551 SOS/DOD, DSN 263-5939

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